are peer reviewed. The normal grant to the Institute is utilized both for the research activities and patient care related activities. In addition, the Institute also receives research grants from other Government organization and non-government agencies The extra-mural funds received have increased over the years from Rs. 9.86 crore (1994-95) to Rs. 20.38 crore (2003-2004). For the year 2004-05, AIIMS has received a sum of Rs. 32.57 crore from the various national and international funding agencies. Department of Scientific and Industrial Research has classified AIIMS as one of the High-Impact Institutions of the country on the basis of both qualitative and quantitative aspects of research being carried out at AIIMS.

Guidelines for private hospitals

2146. SHRI C. PERUMAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is proposed to bring private hospitals under Government guidelines regarding treatment charges and facilities;

(b) if so, the details thereof; and

(c) by when the proposal will be implemented?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) Health being a State subject under the Constitution, it is for the State Government to make regulations for treatments charges and facilities to be provided by the private hospitals in the State.

Changes in structure of healthcare delivery

2147. DR. T. SUBBARAMI REDDY:
DR. KARAN SINGH:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether despite five decades of Central planning and massive expenditure on healthcare, CEO of India Inc. admitted that India erred in designing of health programme;

(b) if so, whether PM has now effected surgery to change structure of healthcare delivery;

(c) if so, whether National Rural Health Mission was launched in April and it will focus on district based planning in 18 States;

(d) if so, whether architectural correction will be followed by increase in health spending in next five years;

(e) if so, the details thereof and in how many States they are not implementing; and

(f) whether health mission is aimed at strengthening referral hospital care for every one lakh persons, as per new standards?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) The UPA Government under Common Minimum Programme is committed to increase the public expenditure on health from the level of 0.9% to 2-3% of GDP over the next 5 years. Keeping this in view, a National Rural Health Mission (NRHM) has been launched on 12.4.2005 by Hon'ble Prime Minister for the entire country to provide comprehensive integrated healthcare facilities especially the vulnerable sections of the society, women and children. The district level planning is one of the key strategies under the Mission.

(d) and (e) During 2005-06 the Government has increased the budget outlay on Health by 30% as compared to 2004-05. While NRHM is being implemented in all the States, some of its strategies are confined to selected high focus States.

(f) One of the strategies under the Mission is to upgrade the Community Health Centre (CHC) which is the referral unit for a population for 1,20,000 to the Indian Public Health Standards (IPHS).

Spurious drugs for diabetes and tuberculosis

2148. SHRI VAYALAR RAVI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that many drugs including life saving drugs are spurious and of low quality being produced by certain drug manufacturing companies;